



## Families of Spinal Muscular Atrophy Canada Pledge Form

**Campaign** to heighten awareness of SMA  
and provide much need **research** at a  
**most critical time**

*(All donations over \$10 will be issued an official  
receipt for income tax purposes.)*

I / We pledge the sum of \$ \_\_\_\_\_  
*(please enclose a cheque)*

Name / Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_

*Please indicate if your donation is in honour or in memoriam of someone:*

\_\_\_\_\_

*If you would like a notification sent to someone of your donation, please indicate name  
and address, and occasion of donation:*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***THANK YOU VERY MUCH!!!***

Please make cheques payable to FSMAC and mail to:

**Families of SMA Canada**

P. O. Box 97

Rivers, Man. R0K 1X0

800-866-0016

Fax: (204) 328-7803

[www.CureSMA.ca](http://www.CureSMA.ca)

